Volume I: Enrollment and Provider Registration

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Chapter 1. Introduction

#### 1.1 Overview of Manual

This document is a reference guide describing the procedural requirements between the Tribal and Regional Behavioral Health Authorities (T/RBHAs), the Arizona Department of Health Services, Division of Behavioral Health (ADHS/DBHS), Office of Program Support, the Arizona Department of Health Services, Information Technology Services (ITS), and the Arizona Health Care Cost Containment System (AHCCCS).

#### Manual Format and Contents

The Procedures Manual has been separated into two stand-alone documents. This was done in order to ensure the appropriate personnel had access to the information related specifically to their area of interest. The manual is structured as follows:

- □ Volume I: Enrollment and Provider Registration
- Volume II: Encounter Procedures, Data Validation, Corporate Compliance and Other Procedures

#### **Intended Users**

The Procedures Manual is distributed to the T/RBHAs and ADHS/DBHS Office of Program Support staff. This manual is to be used as the first point of reference when procedural questions arise.

### 1.2 ADHS/DBHS Office of Program Support Organizational Structure

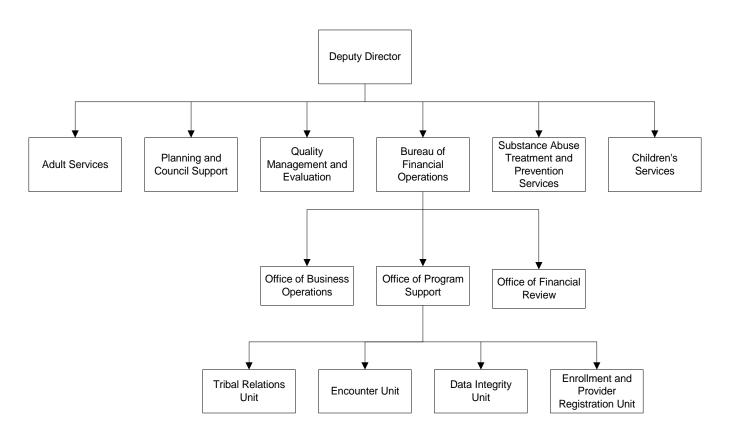
ADHS/DBHS is organized into six bureaus, each focusing on a difference aspect of the behavioral health system. The Office of Program Support (OPS) is within the Bureau of Financial Operations and provides oversight, coordination and monitoring to the T/RBHAs. The Office of Program Support manager oversees the OPS functions and personnel. The chart on the next page diagrams the organizational structure.



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Chapter 1. Introduction

# Arizona Department of Health Services/Division of Behavioral Healt Bureau of Financial Operations Office of Program Support



#### 1.3 Contact Procedures

Individuals with questions should contact ADHS/DBHS Office of Program Support at (602) 364-4704. Assistance is provided from 8:00 A.M. to 5:00 P.M. Monday through Friday.

### 1.4 Revisions to ADHS/DBHS Office of Program Support Procedure Manual

The ADHS/DBHS Office of Program Support Procedure Manual is available on the ADHS/DBHS website. The T/RBHAs will be notified at the monthly T/RBHA/Information Technology meeting when an update has been made to the manual.



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The ADHS/DBHS Office of Program Support Procedure Manual will be updated as necessary to reflect system and procedure changes. Any suggestions for changes should be sent in writing to the Office of Program Support Manager at:

Arizona Department of Health Services Division of Behavioral Health Services Office of Program Support 150 N. 18<sup>th</sup> Avenue, 2<sup>nd</sup> Floor Phoenix, AZ 85007

#### 1.5 Related Information Resources

The T/RBHA should use the following resources in addition to this manual to determine the proper way to process the encounter and enrollment information. These sources include:

- Client Information System (CIS) File Layout and Specifications Manual (T/RBHAs will find the most current version on the RBHA shared FTP server, ADHS/DBHS staff will find the information in Common/Data Book)
- ADHS/DBHS Covered Behavioral Health Services Guide (use the on-line version from http://www.hs.state.az.us/bhs/covserv.htm for the most current version of the guide)
- ADHS/DBHS Encounter Tidbits Newsletter (published monthly and can be downloaded at http://www.hs.state.az.us/bhs/tidbits.htm)
- □ The ADHS/DBHS Contract with each T/RBHA
- AHCCCS Encounter Resources, including (refer to the AHCCCS web site at http://www.ahcccs.state.az.us for a copy of these documents)
  - Encounter Reporting User Manual
  - Medical Policy Manual
  - Fee for Service Provider Manual
  - Encounter Keys and Claims Clues Newsletters
  - Technical Interface Guidelines (TIG)
  - AHCCCS Behavioral Health Services Technical Interface Guidelines
- Coding Documentation
  - UB-92 Manual
  - ICD-9-CM Diagnosis & Procedure Code Manual
  - Physicians' Current Procedural Terminology (CPT) Manual
  - HCFA Common Procedures Coding System (HCPCS) Manual
  - First Data Bank Blue Book (requires a subscription)



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Chapter 2. Enrollment Procedures Section 2.1 General Information

#### 2.1.1 Introduction

This chapter of the *ADHS/DBHS Procedures Manual Volume I* is a reference guide for ADHS/DBHS, the T/RBHAs and their contractors explaining the enrollment procedures and responsibilities across the various entities. It contains chapters addressing the T/RBHA enrollment process (including intakes and closures), the demographic process, ADHS/DBHS and AHCCCS processes, as well as related reference files. Specifically, topics addressed in the following sections include:

| Section    | Topic                          |
|------------|--------------------------------|
| 2.1        | General Information            |
| 2.2        | Overview                       |
| 2.3        | T/RBHA Enrollment Process      |
| 2.4        | T/RBHA Demographic Process     |
| 2.5        | Daily Enrollment Process       |
| 2.6        | Weekly Match Process           |
| 2.7        | Monthly Reconciliation Process |
| 2.8        | Reference Files                |
| Appendix A | Daily Errors and Reports       |
| Appendix B | Monthly Errors and Reports     |
| Appendix C | Reference File Record Layouts  |

This manual is subject to change in response to new state or federal policies. T/RBHAs and other manual holders will be informed of all changes as necessary.

Additional reference material related to these topics is available in the Client Information System (CIS) File Layout and Specifications Manual.

#### 2.1.2 Reporting Requirements

T/RBHAs are required to electronically transmit intake, closure, and demographic data to the ADHS/DBHS File Transfer Protocol (FTP) server.

#### 2.1.3 Processing Schedule

Intakes, closures, and demographic files may be submitted by the T/RBHAs to the FTP server daily. Files submitted by or before 6:00 P.M. will be processed in that day's batch.

#### 2.1.4 Error Correction



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Chapter 2. Enrollment Procedures Section 2.1 General Information

T/RBHAs are required to correct and resubmit any intake, closure or demographic record that fails the pre-processor edits. Intakes, closures and demographic records that fail the pre-processor edits are subject to the same timeliness requirements as the original submission. In other words, the T/RBHA must successfully complete the intake, closure or demographic process within the given timeframes. No extensions are provided for records that fail the pre-processor edits.

T/RBHAs are required to correct and resubmit any intake that fails the AHCCCS edits for client partial match and demographic errors.

#### 2.1.5 Technical Assistance

ADHS/DBHS offers a variety of technical assistance to the T/RBHA including:

- Technical Assistant. ADHS/DBHS representatives are the direct contacts with the eight T/RBHAs. Each representative, referred to as a Technical Assistant, is available during normal business hours and is responsible for:
  - Monitoring the intake, closure and demographic submissions of the T/RBHA(s)
  - Communicating information about system changes
  - Tracking issues and problems experienced by the T/RBHA
- Onsite/offsite technical training. ADHS/DBHS staff offers both onsite and offsite technical training on how to correctly submit intakes, demographic records and closures. Contact the T/RBHA's Technical Assistant to request training.
- Encounter Tidbits. ADHS/DBHS distributes a monthly newsletter to all T/RBHAs.
- Edit Alerts. An Edit Alert is a faxed and emailed notice of system enhancements or changes. The Office of Program Support strives to ensure any system enhancements or changes are communicated to all program participants in an accurate and reliable manner. Edit Alerts will be distributed when the information is first made available and again with the following monthly publication of the Encounter Tidbits.



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Chapter 2. Enrollment Procedures

Section 2.2 Overview

#### 2.2.1 Introduction

The Regional Behavioral Health Authorities (T/RBHAs), ADHS/DBHS Office of Program Support (OPS), ADHS Information Technology Services (ITS) and AHCCCS all play a role in ensuring successful completion of the various processes that encompass the enrollment procedures. The remainder of this section discusses each process in more detail; however, the general steps needed to complete the various processes are outlined below.

#### 2.2.2 T/RBHA Enrollment Process Overview

#### **Intake Process**

This section provides an overview of the intake process, specifically focusing on the T/RBHA and ADHS/DBHS. The table below details the broad responsibility of each entity.

| Entity                               | Responsibility   |  |  |  |
|--------------------------------------|--|--|--|--|
| T/RBHA                               | □ Submit new intake data   |  |  |  |
|                                      | Submit changed or corrected intake data  |  |  |  |
|                                      | <ul><li>Process intake data upon return from<br/>ADHS/DBHS</li></ul>   |  |  |  |
|                                      | <ul> <li>Correct and resubmit intakes that were not<br/>accepted by the ADHS/DBHS Client<br/>Information System (CIS)</li> </ul> |  |  |  |
| ADHS/DBHS Office of                  | □ Provide technical assistance to the  |  |  |  |
| Program Support                      | T/RBHAs upon request   |  |  |  |
|                                      | <ul> <li>Interface with T/RBHAs and ITS to correct<br/>problems identified</li> </ul>  |  |  |  |
| ADHS Information Technology Services | <ul> <li>Process intake data submitted by the<br/>T/RBHA</li> </ul>  |  |  |  |
|                                      | □ Return intake data submitted by the  |  |  |  |
|                                      | T/RBHA   |  |  |  |
| AHCCCS                               | □ None   |  |  |  |



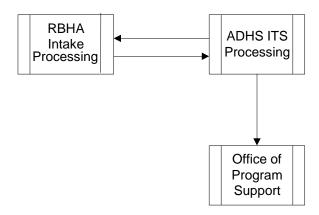
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A flow diagram of the Intake process is depicted below. Details of this process may be found in the Client Information System (CIS) File Layout and Specifications Manual.

#### **Overview of Intake Process**



#### T/RBHA Intake Processing

T/RBHAs can submit intake data daily. One data file is submitted for both new intakes and changes or corrections to existing intakes. The T/RBHAs are responsible for maintaining the intake data in both their system and updating CIS when changes occur. The T/RBHAs are also responsible for downloading and processing the data files returned by ADHS ITS.

#### Office of Program Support

The Office of Program Support interfaces with the T/RBHAs and ITS to identify and correct system problems by initiating program changes and edits. Office of Program Support personnel are available to provide technical support and address issues encountered by the T/RBHAs.

#### ADHS ITS Processing

ADHS ITS processes the file submitted by the T/RBHA daily. Three files are generated as a result of this process, accepted file, rejected file and control file. The accepted file identifies the records that were accepted by CIS. The rejected files identifies the records that were rejected by CIS and need to be corrected and resubmitted. The control file summarizes the overall number of records submitted by the T/RBHA. Upon completion of the nightly process, ADHS ITS returns the three files to the T/RBHAs.



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**Chapter 2.** Enrollment Procedures

Section 2.2 Overview

#### **Closure Process**

This section provides an overview of the closure process and the interaction between the T/RBHA and ADHS/DBHS. The table below details the broad responsibility of each entity.

| Entity                                  | Responsibility  |  |  |  |
|---|---|--|--|--|
| T/RBHA                                  | <ul> <li>Submit new closure data</li> <li>Submit changed or corrected closure data</li> <li>Process closure data upon return from ADHS/DBHS</li> <li>Correct and resubmit closures that were not accepted by the ADHS/DBHS Client Information System (CIS)</li> </ul> |  |  |  |
| ADHS/DBHS Office of<br>Program Support  | <ul> <li>Provide technical assistance to the T/RBHAs upon request</li> <li>Interface with T/RBHAs and ITS to correct problems identified</li> </ul>   |  |  |  |
| ADHS Information Technology<br>Services | <ul> <li>Process closure data submitted by the T/RBHA</li> <li>Return closure data submitted by the T/RBHA</li> </ul>   |  |  |  |
| AHCCCS                                  | □ None  |  |  |  |

A flow diagram of the closure process is depicted on the following page. Details of this process may be found in the Client Information System (CIS) File Layout and Specifications Manual.

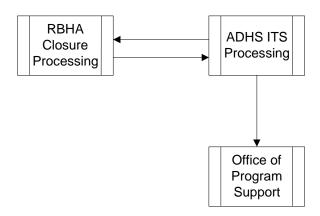


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#### **Overview of Closure Process**



#### T/RBHA Closure Processing

T/RBHAs can submit closure data daily. One data file is submitted for both new closures and changes or corrections to existing closures. The T/RBHAs are responsible for maintaining the closure data in both their system and updating CIS when changes occur. The T/RBHAs are also responsible for downloading and processing the data files returned by ADHS ITS.

#### Office of Program Support

The Office of Program Support interfaces with the T/RBHAs and ITS to identify and correct system problems by initiating program changes and edits. Office of Program Support personnel are available to provide technical support and address issues encountered by the T/RBHAs.

#### **ADHS ITS Processing**

ADHS ITS processes the closure file submitted by the T/RBHA daily. Three files are generated as a result of this process, accepted file, rejected file and control file. The accepted file identifies the records that were accepted by CIS. The rejected file identifies the records that were rejected by CIS and need to be corrected and resubmitted. The control file summarizes the overall number of records submitted by the T/RBHA. Upon completion of the nightly process, ADHS ITS returns the three files to the T/RBHAs.



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#### 2.2.3 Demographic Process Overview

This section provides an overview of the demographic process, specifically summarizing the relationship between the T/RBHA and ADHS/DBHS. The table below details the broad responsibility of each entity.

| Entity                                  | Responsibility   |
|---|--|
| T/RBHA                                  | <ul> <li>Submit new demographic data</li> <li>Submit changed or corrected demographic data</li> <li>Process demographic data upon return from ADHS/DBHS</li> <li>Correct and resubmit demographic records that were not accepted by the ADHS/DBHS Client Information System (CIS)</li> </ul> |
| ADHS/DBHS Office of<br>Program Support  | <ul> <li>Provide technical assistance to the T/RBHAs upon request</li> <li>Interface with T/RBHAs and ITS to correct problems identified</li> </ul>  |
| ADHS Information Technology<br>Services | <ul> <li>Process demographic data submitted by the T/RBHA</li> <li>Return demographic data submitted by the T/RBHA</li> </ul>  |
| AHCCCS                                  | □ None   |

A flow diagram of the demographic process is depicted on the following page. Details of the process may be found in the Client Information System (CIS) File Layout and Specifications Manual.

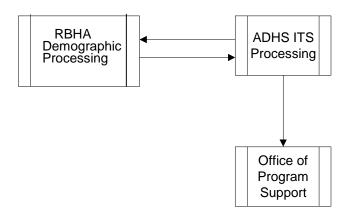


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Section 2.2 Overview

#### **Overview of Demographic Record Process**



#### T/RBHA Demographic Processing

T/RBHAs can submit demographic data daily. One data file is submitted for both new demographic records and changes or corrections to existing demographic records. The T/RBHAs are responsible for maintaining the demographic data in both their system and updating CIS when changes occur. The T/RBHAs are also responsible for downloading and processing the data files returned by ADHS ITS.

#### Office of Program Support

The Office of Program Support interfaces with the T/RBHAs and ITS to identify and correct system problems by initiating program changes and edits. Office of Program Support personnel are available to provide technical support and address issues encountered by the T/RBHAs.

#### ADHS ITS Processing

ADHS ITS processes the demographic file submitted by the T/RBHA daily. Three files are generated as a result of this process, accepted file, rejected file and control file. The accepted file identifies the records that were accepted by CIS. The rejected file identifies the records that were rejected by CIS and need to be corrected and resubmitted. The control file summarizes the overall number of records submitted by the T/RBHA. Upon completion of the nightly process, ADHS ITS returns the three files to the T/RBHAs.

#### 2.2.4 Daily AHCCCS Process Overview



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This section provides an overview of the daily AHCCCS process where ADHS/DBHS individuals are identified as behavioral health recipients in the AHCCCS PMMIS system. The table below details the broad responsibility of each entity.

| Entity                                  |   | Responsibility  |  |  |
|---|---|---|--|--|
| T/RBHA                                  | _ | Research errors and discrepancies identified on error reports Submit corrections to ADHS/DBHS   |  |  |
| ADHS/DBHS Office of<br>Program Support  |   | Provide technical assistance to the T/RBHAs when needed Interface with T/RBHAs, ITS and AHCCCS to correct problems identified   |  |  |
| ADHS Information Technology<br>Services |   | Prepare the data file for submission to AHCCCS Distribute error files generated during the internal processing Process the data returned by AHCCCS Distribute error files generated during the AHCCCS process |  |  |
| AHCCCS                                  |   | Process the data submitted by ADHS/DBHS Return the data file to ADHS/DBHS Return the files generated as part of the process   |  |  |

A flow diagram of the daily AHCCCS process is depicted on the following page. Details of the process may be found in the Client Information System (CIS) File Layout and Specifications Manual.

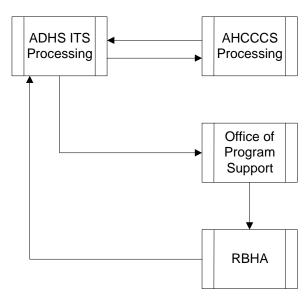


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#### **Overview of Daily AHCCCS Process**



#### ADHS ITS

ADHS ITS prepares a daily match file for transmission to AHCCCS. As part of the transmission process, ADHS ITS generates three files. These files are sent to the T/RBHAs for correction and resubmission.

After AHCCCS returns the processed data, ADHS ITS updates CIS. As a result of the daily process, ADHS ITS sends the T/RBHAs daily updates of the ADHS/DBHS client's Title XIX/XXI behavioral health status. Weekly a full ADHS/DBHS client Title XIX/XXI behavioral health status file is sent. ADHS ITS is also responsible for sending a copy of the AHCCCS response file and two AHCCCS discrepancy files to the T/RBHAs and furnishing copies of the discrepancy files to the Office of Program Support.

#### <u>AHCCCS</u>

On a daily basis AHCCCS processes the file transmitted by ADHS ITS. AHCCCS sends back one file containing responses on those records submitted by ADHS. AHCCCS also generates two discrepancy files.



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#### Office of Program Support

The Office of Program Support interfaces with AHCCCS, ITS and the T/RBHAs to identify and correct system problems by initiating program changes and edits. Office of Program Support personnel are available to provide technical support and address issues encountered by the T/RBHAs.

#### T/RBHA Processing

On a daily basis, the T/RBHAs receive five files that have been generated as part of the ADHS ITS and AHCCCS processes. The T/RBHAs are responsible for researching and correcting the errors and discrepancies. Corrections are made through the intake process.

#### 2.2.5 Weekly Match Process Overview

This section provides an overview of the weekly match process in which ADHS/DBHS individuals with an open intake within the last six months are selected to be sent to AHCCCS if they have not already been identified as an AHCCCS behavioral health recipient or if they have a break in AHCCCS recipient segments during that time. The table below details the broad responsibility of each entity.

| Entity                                  |  | Responsibility  |  |  |
|---|--|---|--|--|
| T/RBHA                                  |  | None  |  |  |
| ADHS/DBHS Office of<br>Program Support  |  | None  |  |  |
| ADHS Information Technology<br>Services |  | Prepare the data and add to the daily file for submission to AHCCCS |  |  |
| AHCCCS                                  |  | None  |  |  |



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#### ADHS ITS

ADHS ITS prepares a weekly match file and adds it to the daily file for transmission to AHCCCS. See Sections 2.2.4 for overview of daily AHCCCS process.

Details of the weekly process may be found in the Client Information System (CIS) File Layout and Specifications Manual.

#### 2.2.6 Monthly Reconciliation Process Overview

This section provides an overview of the monthly reconciliation process. Unlike the earlier processes that focused on identifying Title XIX/XXI behavioral health eligible ADHS/DBHS individuals at AHCCCS, this process compares the two systems and those already identified. The table below details the broad responsibility of each entity.

| Entity                                  | Responsibility  |  |  |
|---|---|--|--|
| ADHS/DBHS Office of<br>Program Support  | <ul> <li>Research and correct posting<br/>discrepancies identified on error report</li> </ul>   |  |  |
| T/RBHA                                  | □ Correct, as needed, errors found by Program Support   |  |  |
| ADHS Information Technology<br>Services | <ul> <li>Process the reconciliation data submitted by AHCCCS</li> <li>Create and distribute error report generated during the reconciliation</li> <li>Distribute files generated by AHCCCS</li> <li>Correct, as needed errors found by Program Support</li> </ul> |  |  |
| AHCCCS                                  | <ul> <li>Prepare the reconciliation data for submission to ADHS/DBHS</li> <li>Return the files generated as part of the process</li> </ul>  |  |  |



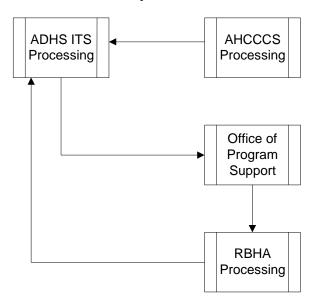
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A flow diagram of the monthly reconciliation process is depicted below. Details of the process may be found in the Client Information System (CIS) File Layout and Specifications Manual.

#### **Overview of Monthly Reconciliation Process**



#### **AHCCCS**

AHCCCS prepares a monthly At Risk file, which identifies all Title XIX/XXI behavioral health eligibles, an FYI file, and reconciliation files for transmission to ADHS ITS.

#### ADHS ITS

On a monthly basis ADHS IT processes the monthly reconciliation file transmitted by AHCCCS. As a result of this process ADHS ITS creates and provides the Office of Program Support an error report identifying AHCCCS recipient discrepancies. ADHS IT also distributes the At Risk and FYI files.

#### Office of Program Support

The Office of Program Support receives and is responsible for researching and correcting, on a monthly basis, the errors in the Client Information System identified on the error report generated by ADHS ITS.



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Section 2.3 T/RBHA Enrollment Process

#### **Intake Process**

#### 2.3.1 Introduction

This section details the requirements of the T/RBHA intake process. Both the T/RBHA and ADHS/DBHS are responsible for ensuring successful completion of the Intake.

#### 2.3.2 Timeliness Requirements

Intakes may be submitted by the T/RBHAs to the T/RBHA-specific FTP server daily. Files submitted by or before 6:00 P.M. will be processed in that day's batch. The file should contain new intakes and changes and/or corrections to existing intakes. The intake must be successfully accepted in the CIS system within 14 days from the date of intake. This includes corrections to intakes that were not accepted when first submitted. Other changes (i.e. address changes) should be submitted as needed.

#### 2.3.3 Data Collection – New Intakes

This section will concentrate on data the T/RBHA needs to collect during the intake process.

Step 1: Obtain Specific Data Elements

Responsibility: T/RBHA

The T/RBHA must collect the following key demographic information from the individual and/or person conducting the intake as part of the intake process:

- First name
- Last name
- Date of birth
- Gender
- □ ADHS/CIS Client ID
- □ AHCCCS ID
- Social security number

The T/RBHA should refer to the Client Information System (CIS) File Layout and Specifications Manual for a complete list of data variables required for the intake.



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Step 2: Check Identification Responsibility: T/RBHA

The T/RBHA must verify the individual's first and last name by reviewing a valid form of identification (i.e. driver's license, social security card, birth certificate).

Step 3: Determine Title XIX/XXI Behavioral Health Eligibility Responsibility: T/RBHA

The T/RBHA should determine whether the individual is Title XIX/XXI behavioral health eligible. Eligibility can be determined by accessing the AHCCCS PMMIS system, requesting the information from Medifax, accessing the IVR system (the AHCCCS automated phone line), or viewing the AHCCCS Web-Based Verification screen.

The T/RBHA is required to include the AHCCCS ID on the intake if the verification process yields an AHCCCS ID regardless of eligibility.

It is in the best interest of the state and the T/RBHA to maximize federal funding through Title XIX/XXI eligibility. The state conserves resources by minimizing the amount of state-only funds expended, and the T/RBHA receives a higher capitation rate for Title XIX/XXI individuals.

Step 4: Review Key Demographic Information Maintained by AHCCCS Responsibility: T/RBHA

The T/RBHA must review the demographic data maintained by AHCCCS. This may be done by accessing the AHCCCS PMMIS system, requesting the information from Medifax, accessing the IVR system (the AHCCCS automated phone line), or viewing the AHCCCS Web-Based Verification screen. The T/RBHA should review the variables and make note of the following key demographic information:

- First name
- Last name
- Date of birth
- Gender
- □ AHCCCS client ID
- Social security number
- Health plan

Step 5: Check Enrollment Status of Individual



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Responsibility: T/RBHA

The T/RBHA must ensure the individual is not currently enrolled in another T/RBHA.

□ If the individual is already enrolled with another T/RBHA, the T/RBHA conducting the current intake must contact the other T/RBHA and request the enrollment segment be closed. The T/RBHA should check enrollment status using the CIS interface.

ADHS/DBHS will not process the new intake until the closure on the previous intake is completed.

- If the intake to be entered is already closed and the intake and closure dates are:
  - o prior to an existing intake
  - o between two existing intakes

the intake must be entered on the CIS interface using the Intake Maintenance screen instead of on an 834 intake file through the T/RBHA-specific FTP server.

Only the intake and closure dates of the inserted intake will be entered on the Intake Maintenance screen. All other intake information will be copied from the client's most recent intake in the CIS database. Any required updates to this information will be made using the instructions for intake changes described in Section 2.3.4, Data Collection – Changes and/or Corrections to Intakes.

Step 6: Review Key Demographic Information Maintained by ADHS/DBHS Responsibility: T/RBHA

The T/RBHA must review the demographic data maintained by ADHS/DBHS. This is accomplished by accessing the CIS interface. All of the T/RBHAs have access to the CIS interface; however, the providers do not. For those without access to CIS, demographic data can be obtained from the ADHS/DBHS Statewide Roster file. The full ADHS/DBHS Statewide Roster file is available for the T/RBHAs to download from the FTP server weekly; updates should be downloaded daily. See the Client Information system (CIS) File Layout and Specifications Manual for more information on the ADHS/DBHS Statewide Roster file.

Revision Date: July 1, 2004



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The T/RBHA should review the variables and make note of the following key demographic information:

- First name
- Last name
- Date of birth
- □ Gender
- ADHS/CIS client ID
- □ AHCCCS client ID
- Social security number

NOTE: If the T/RBHA finds an ADHS/DBHS client ID for an individual, the T/RBHA is required to include the ID on the intake. If a client ID is submitted on the intake, the ID must be an existing ADHS/DBHS client ID. Only intakes for new clients not appearing in the ADHS/CIS system may be submitted without an ADHS/DBHS client ID. A system generated ID will be assigned to these clients.

RBHAs will be required to keep an override justification log for all intakes submitted with <u>no Client ID</u> and <u>an Action Code of "O"</u>. See the Override Log Format found in Exhibit 2.3.A at the end of this section for a list of required fields.

Step 7: Compare Key Demographic Data Collected During Intake, Data Reviewed in AHCCCS, and Data Reviewed in CIS

#### Responsibility: T/RBHA

After the T/RBHA has collected the intake data, and reviewed both AHCCCS and CIS, the data should be compared. The results of that comparison will determine which of the following courses of action should be taken.

- If the data collected from the client at the intake interview does not include a copy of the client's social security card, attempt to get and/or verify the SSN given by the client:
  - In AHCCCS (RP185)
  - In ADHS/CIS (Client Inquiry)
- If the client submitted a copy of their social security card or if the SSN exists in the AHCCCS system or on an existing intake for the client in the ADHS/CIS system, the RBHA must include the SSN



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on the new intake being submitted for the client unless the client specifically requests his SSN not be used.

- If the data collected from the client at the intake interview does not include a copy of the client's AHCCCS ID card, attempt to get and/or verify the AHCCCS ID given by the client:
  - AHCCCS PMMIS RP290 screen, Medifax, IVR system (the AHCCCS automated phone line), or AHCCCS Web-Based Verification screen
  - In ADHS/CIS (Client Inquiry)
- If the client submitted a copy of their AHCCCS ID or if the AHCCCS ID exists in the AHCCCS system or on an existing intake for the client in the ADHS/CIS system, the RBHA must include the AHCCCS ID on the new intake being submitted for the client.
- If the client name collected during the intake process doesn't match the name on the previous intake in CIS for the client, it may still be entered as collected as long as it matches AHCCCS. Be sure to check AHCCCS name history screen if there is a discrepancy (RP135H).
- If the client's date of birth and/or gender do not match the data on the previous intake in CIS for the client, it must be entered as it appears in CIS and then changed after the intake has been accepted in CIS. See Section 2.3.4, Data Collection – Changes and/or Corrections to Intakes for specific instructions on how to complete this process.

The ultimate goal in enrolling a client who is Title XIX/XXI behavioral health eligible is to match the basic demographic data on the intake (client name, date of birth, gender, SSN and AHCCCS ID) to that in the AHCCCS system. This will enable the client to be recognized as federally funded and allow encounters for the client to be submitted to AHCCCS.

- If the basic data on the new CIS intake doesn't match PMMIS then the T/RBHA should:
  - Research thoroughly to determine which data is correct.
  - If PMMIS is correct, change the data in CIS to match using the instructions for intake changes described in Section 2.3.4, Data Collection – Changes and/or Corrections to Intakes.



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 If CIS is correct, advise the client that they will need to update their demographic record with their AHCCCS enrollment source. In most cases this is the Department of Economics Security, Social Security Administration.

#### 2.3.4 Data Collection – Changes and/or Corrections to Intakes

This section will concentrate on the data that the T/RBHA needs to collect when submitting a correction and/or change. A correction and/or change can occur because the ADHS/DBHS information is incorrect or it can occur because the AHCCCS information is incorrect.

Changes and/or Corrections due to Incorrect AHCCCS Information

Step 1: Identify the Data that Needs to be Changed/Corrected Responsibility: T/RBHA

The data that needs to be changed and/or corrected must be verified with a valid form of identification. For example: a copy of a divorce decree indicating name change is required if a women is going back to her maiden name, copy of an SSN card is required to correct an incorrect SSN.

Step 2: Assist Client with Change/Correction Process

Responsibility: T/RBHA

The data in the AHCCCS system is generated by the AHCCCS enrollment source. The T/RBHA should assist the client in contacting the enrollment source to see what kind of documentation is needed to get the data changed or corrected and whether or not documentation may be mailed or delivered in person to the enrollment source.

Step 3: Update the Intake Information

Responsibility: T/RBHA

After the enrollment agency has processed the demographic change, a change/corrected intake must be submitted to CIS, if needed. The T/RBHA must modify the original intake with the corrected information to match the data now contained in the AHCCCS system.

Step 4: Submit the Corrected Information

Responsibility: T/RBHA



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The T/RBHA must submit all corrected intakes to ADHS/DBHS following the normal submission procedures. All variables on the intake must be submitted, not just the variables that have been corrected. How to submit data is detailed in the Section 2.3.6, Data Submission.

#### Changes and/or Corrections due to Incorrect ADHS/DBHS Information

Step 1: Identify the Data that Needs to be Changed/Corrected Responsibility: T/RBHA

The data that needs to be changed and/or corrected should be verified with a valid form of identification. For example: a copy of a divorce decree indicating name change is required if a women is going back to her maiden name, copy of an SSN card is required to correct an incorrect SSN.

Step 2: Update the Intake Information

Responsibility: T/RBHA

After the T/RBHA has verified the correct demographic information, the intake information must be updated. The T/RBHA must modify and submit the original intake with the corrected information which matches the data contained in the AHCCCS system.

Step 3: Submit the Corrected Information

Responsibility: T/RBHA

The T/RBHA must submit the corrected intake to ADHS/DBHS following the normal submission procedures. All variables on the intake must be submitted, not just the variables that have been corrected. How to submit data is detailed in Section 2.3.6, Data Submission.

# 2.3.5 Data Collection – Legal Name Changes due to Adoption, Marriage or Divorce

The current AHCCCS practice is to link individuals who have had a name change due to adoption, marriage or divorce if they are issued a second AHCCCS ID,



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using the new AHCCCS ID as the primary ID and making the old AHCCCS ID a secondary ID. If the T/RBHA identifies a client with two AHCCCS IDs that have not been linked, they should notify the Office of Program Support so that AHCCCS may be contacted and a link between the AHCCCS IDs established.

ADHS/DBHS recommends that the T/RBHA close the current intake when an individual has legally changed his/her name, and open a new intake using the same client ID but with the client's new name and new AHCCCS ID, if applicable. If possible, the new intake date should correspond to the date of the new AHCCCS ID in the AHCCCS system.

If the T/RBHA does not submit a new intake, the next time a transaction is submitted to AHCCCS, the transaction may be rejected due to demographic discrepancies.

Step 1: Verify the Individual's Name Change

Responsibility: T/RBHA

The T/RBHA must verify the individual has legally changed his/her name and for all practical purposes assumed a new identity. In addition to the name change, the individual may have been assigned a new social security number. If an AHCCCS client, the individual may have also been issued a new, AHCCCS ID.

Step 2: Close the Existing Intake Record

Responsibility: T/RBHA

Once the T/RBHA has verified the name change, the T/RBHA should submit a closure for the individual.

Step 3: Open a New Intake with the Changed Client Information Responsibility: T/RBHA

After the T/RBHA has processed the closure, the T/RBHA should submit a new intake.

Step 4: Notify AHCCCS
Responsibility: T/RBHA

AHCCCS client demographic data comes from the client's enrollment source. If AHCCCS does not have the name change in their system, the T/RBHA should assist the client in contacting their AHCCCS enrollment source to arrange for an appointment or to send the



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enrollment source the appropriate documentation to facilitate the change.

If the T/RBHA finds that a new AHCCCS ID has been issued to the client without a link between the old AHCCCS ID and the new AHCCCS ID, they should notify the Office of Program Support so that AHCCCS may be contacted and a link between the AHCCCS IDs established.

#### 2.3.6 Data Submission

After the intake is complete, the T/RBHA must transmit the data to ADHS/DBHS. The following steps should be completed:

Step 1: Create and Save the Data File

Responsibility: T/RBHA

Create and save the data file using the HIPAA compliant transaction outlined in the Client Information System (CIS) File Layout and Specifications Manual

Step 2: Upload the File to the FTP Server

Responsibility: T/RBHA

Each T/RBHA has a "T/RBHA-specific" directory on the FTP server. The intake file should be uploaded to the T/RBHA-specific directory by or before 6:00 P.M. in order for the file to be processed in that day's batch.

#### 2.3.7 Data Processing

Step 1: Download the File from the FTP Server

Responsibility: ADHS ITS

Each night, ADHS ITS downloads any intake files the T/RBHAs have sent to the FTP server.

Step 2: Process the Data Responsibility: ADHS ITS

The intake data, along with the closure and demographic data, are all processed nightly through an automated system that updates and maintains the closure file, the intake file, the demographic file and the enroll mods initial file. Both the intake file and the enroll mods initial file are updated with the information submitted as part of the intake process.



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The intake file combines new enrollments from each T/RBHA and changes/corrections to existing enrollments. The enroll mods initial file is the first step in creating the daily AHCCCS file. AHCCCS processes this file to identify which ADHS/DBHS enrolled individuals qualify for Title XIX/XXI funding for their behavioral health services. This process is discussed in greater detail in Section 2.6, Daily Enrollment Process.

Step 3: Return the Data

Responsibility: ADHS ITS

When ADHS ITS has completed processing the data, three files are returned to the FTP T/RBHA-specific server.

See the Client Information System (CIS) File Layout and Specifications Manual for a detailed diagram of the T/RBHA enrollment process, which includes intakes.

# 2.3.8 Data Returned to T/RBHAs Responsibility: T/RBHA

The three output files containing the results of the processing should be downloaded from the FTP server by the T/RBHA. These files are:

- Control file
- Accepted file
- Error Report file

#### Control File

The control file summarizes the overall number of records submitted by the T/RBHA. The T/RBHA should review the control totals to ensure the original number of intake records submitted by the T/RBHA and what was returned to the T/RBHA are the same.

#### Accepted File

The accepted file contains all the records that passed the pre-processor edits and were successfully enrolled with ADHS/DBHS. This file should be downloaded and integrated into the appropriate processes at the T/RBHA.

#### Error Report File



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The error report file contains all the records that did not pass the pre-processor edits and therefore were not enrolled with ADHS/DBHS. This file should be downloaded, the errors corrected and the intakes resubmitted to ADHS/DBHS.

The file layouts for control file, accepted file and error report file are located in the Client Information System (CIS) File Layout and Specifications Manual.

#### 2.3.9 Error Corrections

Responsibility: T/RBHA

The T/RBHA is required to correct and resubmit all errors returned in the Error Report File discussed above. A list of the error codes and descriptions may be found in the Client Information System (CIS) File Layout and Specifications Manual.

## 2.3.10 Requesting a Manual Deletion Responsibility: T/RBHA

The T/RBHA can request the manual deletion of an intake when the same intake was submitted more than once to CIS in the same transmission file. For example, the intake information for John Doe was entered by two data entry clerks on the same day. The T/RBHA can also request the deletion of an intake to eliminate a duplicate client ID entered in error, as long as no encounters have been entered in CIS under the Client ID being deleted.

#### **Closure Process**

#### 2.3.11 Introduction

This section details the requirements of the T/RBHA closure process. Both the T/RBHA and ADHS/DBHS are responsible for ensuring successful completion of the closure. Specific responsibilities are notated with each step.

#### 2.3.12 Timeliness Requirements

The T/RBHAs may submit closures to the FTP server daily. Files submitted by or before 6:00 P.M. will be processed in that day's batch.

Closure data must be submitted within 14 days of the actual closure.

#### 2.3.13 Data Collection - New Closures



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This section will concentrate on the data that the T/RBHA needs to collect during the closure process.

Step 1: Determine whether the Intake Should be Closed

Responsibility: T/RBHA

Before the T/RBHA processes the closure, they must determine a closure is the appropriate action. Closures should only be submitted for the following reasons:

- Treatment completed
- □ Change in eligibility/entitlement information
- Client declined further service
- Lack of contact
- Incarceration
- □ Death
- Moved out of area
- □ Inter T/RBHA transfer
- One time consultation

The T/RBHA should submit an intake change for all other actions. See Section 2.3.4, Data Collection – Changes and/or Corrections to Intakes for procedures on how to submit an intake change.

Step 2: Obtain Specific Data Elements

Responsibility: T/RBHA

The T/RBHA should collect the following information from either the individual or the case manager as part of the closure process:

- ADHS/DBHS client ID
- Intake date
- Closure date

Other variables are specific to the T/RBHA, the provider or specific variables required for transmission.

# 2.3.14 Data Collection – Changes and/or Corrections to Closures Responsibility: T/RBHA

When there is a change or correction to the closure data, the T/RBHA must update their information as well as ADHS/DBHS data. The T/RBHAs do this by completing the following steps.



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Step 1: Identify the Data that Needs to be Changed/Corrected

Responsibility: T/RBHA

The data that needs to be changed and/or corrected should be verified by either the individual, case manager or clinical personnel.

Step 2: Update the Closure Information

Responsibility: T/RBHA

The T/RBHA should modify the original closure with the corrected information.

Step 3: Submit the Updated Closure

Responsibility: T/RBHA

The T/RBHA must submit the corrected closure to ADHS/DBHS following the normal submission procedures. All variables on the closure must be submitted, not just the variables that have been corrected. How to submit data is detailed in Section 2.3.15, Data Submission.

#### 2.3.15 Data Submission

After the closure data collection is complete, the T/RBHA must transmit the data to ADHS/DBHS. The following steps should be completed:

Step 1: Create and Save the Data File

Responsibility: T/RBHA

 Create a file using the HIPAA compliant transaction outlined in the Client Information System (CIS) File Layout and Specifications Manual

Step 2: Upload the File to the FTP Server

Responsibility: T/RBHA

Each T/RBHA has a "T/RBHA-specific" directory on the FTP server. The closure file should be uploaded to the T/RBHA-specific directory by or before 6:00 P.M. in order for the file to be processed in that day's batch.

#### 2.3.16 Data Processing



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Step 1: Download the File from the FTP Server

Responsibility: ADHS ITS

Each night, ADHS ITS downloads any closure files the T/RBHAs have sent to the FTP server.

Step 2: Process the Data Responsibility: ADHS ITS

The closure data, along with the intake and demographic data, are all processed nightly through an automated system that updates and maintains the closure file, the intake file, the demographic file and the enroll mods initial file. The closure file is update with the data submitted by the T/RBHA. The intake file is also updated with the closure date. If the individual is currently identified as an AHCCCS behavioral health recipient, the enroll mods initial file is also updated to send the closure to AHCCCS. The enroll mods initial file is part of the daily AHCCCS process discussed in Section 2.5.

Step 3: Return the Data
Responsibility: ADHS ITS

When ADHS ITS has completed processing the data, three files are returned to the FTP T/RBHA-specific server.

See the Client Information System (CIS) File Layout and Specification Manual for a detailed diagram of the T/RBHA enrollment process, which includes closures.

# 2.3.17 Data Returned from ADHS/DBHS Responsibility: T/RBHA

The three output files containing the results of the processing should be downloaded from the FTP server by the T/RBHA. These files are:

- □ Control file
- Accepted file
- □ Error Report file



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#### Control File

The control file summarizes the overall number of records submitted by the T/RBHA. The T/RBHA should review the control totals to ensure the original number of closure records submitted by the T/RBHA and what was returned to the T/RBHA are the same.

#### Accepted File

The accepted file contains all the records that passed the pre-processor edits and were successfully closed with ADHS/DBHS. This file should be downloaded and integrated into the appropriate processes at the T/RBHA.

#### Error Report File

The error report file contains all the records that did not pass the pre-processor edits and therefore were not closed with ADHS/DBHS. This file should be downloaded, the errors corrected and the closures resubmitted to ADHS/DBHS.

The file layouts for control file, accepted file and error report file are located in the Client Information System (CIS) File Layout and Specification Manual.

#### 2.3.18 Error Corrections

Responsibility: T/RBHA

The T/RBHA is required to correct and resubmit all errors returned in the Error Report File discussed above. A list of all possible error codes and descriptions may be found on the Client Information System (CIS) File Layout and Specification Manual.

# Exhibit 2.3.A Override Log Format

### **Intake Override Log Format**

| Field Name                            | Type    | Size | Justify | Filler | <b>Description/Comments</b>   |
|---------------------------------------|---------|------|---------|--------|---|
| RBHA-ID                               | Char    | 2    | Right   | Zeros  | Contractor identification number of RBHA submitting the intake. The following are valid codes:  03 – The Excel Group  08 – ValueOptions  11 – Gila River Indian Tribe  14 – Navajo Nation  15 – NARBHA  23 – PGBHA  25 – Pascua Yaqui Tribe  26 – CPSA Region 5  27 – CPSA Region 6 |
| Intake-Submission-<br>Date            | Numeric | 8    | None    | Zeros  | The date the intake was submitted to CIS. This date must be less than or equal to the current date.  CCYYMMDD and a valid date.   |
| Intake-Date                           | Numeric | 8    | None    | Zeros  | The date the intake was completed. This date must be less than or equal to the current date. CCYYMMDD and a valid date.   |
| First-Name                            | Char    | 10   | Left    | Spaces | Client's first name on intake submitted.  |
| Last-Name                             | Char    | 15   | Left    | Spaces | Client's last name on intake submitted.   |
| DOB                                   | Numeric | 8    | None    | Zeros  | Client's date of birth on intake submitted. CYYMMDD and a valid date.   |
| Gender                                | Char    | 1    | Left    | Space  | Gender on intake submitted.  Valid values: M=Male, F=Female   |
| AHCCCS-ID                             | Char    | 9    | Left    | Spaces | Indicates client's AHCCCS identifier on intake submitted. Required if client has been or is enrolled in AHCCCS.   |
| SSN                                   | Numeric | 10   | Left    | Spaces | Client's social security number on intake submitted. First nine digits is the SSN and the tenth digit should be a space. Required when available.   |
| Matched-Client-ID                     | Char    | 10   | Left    | Spaces | CIS client ID on intake matched against.  |
| Field-Matched  Override-Justification | Char    | 9    | Left    | Spaces | Field intake matched against. Valid values: Name/DOB AHCCCS-ID SSN Justification for override.  |
| Override-Justification                | Char    | 50   | Left    | Spaces | justification for override.   |



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Section 2.4 T/RBHA Demographic Process

#### 2.4.1 Introduction

This section details the requirements of the T/RBHA demographic process. Both the T/RBHA and ADHS/DBHS are responsible for ensuring successful completion of the demographic process. Specific responsibilities are notated with each step.

### 2.4.2 Data Specifications

Individuals who receive services from one of the T/RBHAs need to have current demographic data in the ADHS/DBHS Client Information System (CIS). A complete demographic record must be submitted within 45 days of intake but it is recommended that a partial demographic record containing basic information be submitted the day after the intake is submitted and accepted into CIS.

A complete demographic record update must be completed, at a minimum, once a year. In the interim, a partial demographic record containing specific information such as diagnosis code changes or mental health category changes, must be submitted any time there is an update.

Below are some general guidelines the T/RBHAs should follow when submitting a demographic record at one of the required intervals.

#### Type 1: Enrollment

The T/RBHA is required to submit a demographic record on every client. If complete data is not immediately available, a partial demographic record should be submitted containing as much information as possible. If a partial demographic record is initially submitted, a complete demographic record must be completed and submitted within 45 days of intake. A table summarizing the T/RBHAs responsibility when completing the enrollment demographic record can be found in the Client Information System (CIS) File Layout and Specifications Manual.

#### Type 2: During Treatment

The T/RBHAs are required to maintain current demographic information in CIS. Current demographic information is defined as a complete demographic record update yearly with updates of individual data as needed. For example, if the client's last complete demographic record was dated 9/1/03, the next complete demographic record update is due



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by 9/1/04. However, if the client's diagnosis code changed on 10/1/03, the T/RBHA would be required to submit a partial demographic record at that time with the new diagnosis code and if the client's mental health category changed from general mental health to seriously mental ill on 11/1/03, the T/RBHA would be required to submit a partial demographic record indicating the change at the time it occurred.

Type 3: Disenrollment

At the time of disenrollment and/or when an individual completes his/her treatment, the T/RBHA is required to submit a demographic record update.

## 2.4.3 Timeliness Requirements

The T/RBHAs may submit the demographic file to the FTP server daily. Files submitted by or before 6:00 P.M. will be processed in that day's batch. The chart below summarizes the T/RBHAs responsibility.

| Demographic<br>Interval | Type of<br>Demographic<br>Update | CIS Requirements   |
|-------------------------|----------------------------------|--|
| Enrollment              | Partial                          | As data is collected   |
|                         | Complete                         | 0 to 45 days from the intake date  |
|                         | Complete                         | Within 1 year of last complete demographic update  |
| During Treatment        | Partial                          | Within 15 days of collecting data that needs to be updated   |
| Disenrollment           | Partial                          | Within 15 days from<br>the closure date but<br>not before 834<br>closure has been<br>accepted in CIS |

## 2.4.4 Data Collection – New Demographic Records



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This section concentrates on the data that the T/RBHA needs to collect during the demographic process. The T/RBHA may collect the data for the complete demographic file at the time of intake, or the complete demographic file may be completed at a later date.

Step 1: Obtain Specific Data Elements

Responsibility: T/RBHA

The T/RBHA must collect the following information from the individual and/or the case manager as part of the demographic process:

- Intake date
- SMI determination
- IV drug user
- Pregnant woman
- Woman with dependants
- Reason for closure
- Diagnosis code(s)

Other variables are specific to the T/RBHA, the provider or specific variables required for transmission and are listed in the Client Information System (CIS) File Layout and Specifications Manual.

## 2.4.5 Data Collection – Updates to Demographic Records

If an update to the demographic record is required, the T/RBHA must perform the following steps:

Step 1: Identify the Data to be Updated

Responsibility: T/RBHA

The data that needs to be updated should be verified by either the individual, case manager or clinical personnel.

Step 2: Update the Demographic Information

Responsibility: T/RBHA

The T/RBHA should complete a demographic record update with the corrected information.

Step 3: Submit the Updated Demographic File



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Responsibility: T/RBHA

Follow the procedures in Section 2.4.6 for details on submitting demographic files to ADHS/DBHS.

## 2.4.6 Submitting the Data

Responsibility: T/RBHA

After the demographic file is complete, the T/RBHA must transmit the data to ADHS/DBHS. The following steps must be completed:

Step 1: Create and Save the Data File

Responsibility: T/RBHA

 Create and save the demographic file using the transaction outlined in the Client Information System (CIS) File Layout and Specifications Manual.

Step 2: Upload the File to the FTP Server

Responsibility: T/RBHA

Each T/RBHA has a T/RBHA-specific directory on the FTP server. The demographic file should be uploaded to the T/RBHA-specific directory by or before 6:00 P.M. in order for the file to be processed in that day's batch.

## 2.4.7 Data Processing

Step 1: Download the Demographic File from the FTP Server

Responsibility: ADHS ITS

Each night, ADHS ITS downloads any demographic files the T/RBHAs have sent to the FTP server.

Step 2: Process the Data
Responsibility: ADHS ITS

The demographic data, along with the intake and closure data, are all processed nightly through an automated system that updates and maintains the closure file, the intake file, the demographic file and the enroll mods initial file. The demographic record is updated with the data



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Section 2.4 T/RBHA Demographic Process

submitted by the T/RBHA. If the SMI or SED special population flag on the demographic record is checked, the enroll mods initial file is also updated to send a mental health category change/verification to AHCCCS. This process is discussed in greater detail in Section 2.5, Daily AHCCCS Process.

The demographic file is updated with the data fields from the partial or complete demographic record.

Step 3: Return the Data Files to the T/RBHA-specific FTP Server Responsibility: ADHS ITS

When ADHS ITS has completed processing the data, three files are returned to the FTP T/RBHA-specific server.

See the Client Information System (CIS) File Layout and Specifications Manual for a detailed diagram of the demographic process.

## 2.4.8 Data Returned to the FTP T/RBHA-Specific Server Responsibility: T/RBHA

The three output files containing the results of the processing must be downloaded from the FTP server by the T/RBHA. These files are:

- Control file
- Accepted file
- Error Report file

## Control File

The control file summarizes the overall number of records submitted by the T/RBHA. The T/RBHA should review the control totals to ensure the original number of demographic records submitted and what was returned are the same.

#### Accepted File

The accepted file contains all the records that passed the CIS nightly process and were successfully processed by ADHS/DBHS. This file should be downloaded and integrated into the T/RBHA appropriate processes.

#### Error Report File



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The error report file contains all the records that did not pass the CIS nightly process and therefore were not accepted by ADHS/DBHS. This file must be downloaded, the errors corrected and the demographic records resubmitted to ADHS/DBHS.

The file layouts for the control file, accepted file and error report file are located in the Client Information System (CIS) File Layout and Specifications Manual.

## 2.4.9 Error Corrections

Responsibility: T/RBHA

It is the T/RBHAs responsibility to research and correct the errors on the demographic records not accepted by ADHS/DBHS and resubmit them.

The Client Information System (CIS) File Layout and Specifications Manual contains a list of all possible error codes and descriptions.



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Chapter 2. Enrollment Procedures Section 2.5 Daily AHCCCS Process

#### 2.5.1 Introduction

As discussed in Sections 2.3 and 2.4, ADHS/DBHS processes the intakes, closures and demographic data submitted by the T/RBHAs as part of the automated nightly edit and update process. Once this is complete, all accepted records populate the various files maintained in CIS. These files are then used to run internal processes that create data files that are transferred to AHCCCS. In order for an individual to receive federal funding, he/she must be both Title XIX/XXI behavioral health eligible and listed at AHCCCS as a behavioral health recipient. The daily AHCCCS process is intended to identify T/RBHA enrolled individuals who are eligible for behavioral health services with AHCCCS. All four entities, the T/RBHAs, ADHS/DBHS, ADHS ITS and AHCCCS have a responsibility in ensuring qualified individuals are successfully identified.

#### 2.5.2 ADHS/DBHS Process

The daily AHCCCS process at ADHS/DBHS is intended to generate a file for transmission to AHCCCS in order to identify individuals eligible for Title XIX/XXI funded behavioral health services. ADHS ITS is also responsible for processing the file returned by AHCCCS and distributing appropriate data to the Office of Program Support and the T/RBHA-specific FTP servers.

Step 1: Create File for Transmission to AHCCCS Responsibility: ADHS ITS

ADHS ITS has a daily process that identifies individuals who are not currently listed at AHCCCS as a behavioral health recipient. All records eligible for the daily AHCCCS process must meet one of the following criteria before they are processed.

- No corresponding AHCCCS behavioral health recipient segment on the AHCCCS/behavioral health recipient file.
- New closure date on the Intake file.
- New intake.
- Intake segments identified on the demographic file, which have a mental health category change to be sent to AHCCCS.



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Records meeting at least one of the above criteria are then processed through the following program:

## Program Name

#### **Purpose**

Daily Match

Creates a final enroll mods file that is transmitted to AHCCCS for Title XIX/XXI behavioral health recipient determination.

The program also creates three files. Depending on the error, records identified on these files may or may not be sent to AHCCCS for processing.

Step 2: Distribute Files to the T/RBHAs

Responsibility: ADHS ITS

For each file, ADHS ITS sorts by T/RBHA, and distributes a copy to the FTP T/RBHA-specific server. A copy of the files is also provided to the Office of Program Support. The files generated as a result of the 630 program are as follows:

## Report Name

## **Purpose**

Excluded

The purpose of this file is to identify individuals who were excluded from the Daily Match process, thus not included in the daily transfer to AHCCCS. These individuals will not be sent to AHCCCS for designation as using Title XIX/XXI services until the errors are corrected.



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Report Name

Purpose

Date Changed This is an informational file that

identifies records whose start date or end date were modified based on the intake date and 6-month rule. These records are sent to AHCCCS for processing with the modified date.

Error Report The purpose of this file is to identify

records that did not pass the Daily Match process. These records have not been included in the enroll mods

file transferred to AHCCCS.

Step 3: Correct and Resubmit Responsibility: T/RBHA

The T/RBHAs are required to research, correct and resubmit if applicable, errors identified on the files. Corrected errors can be resubmitted through the intake change/corrected process discussed in Section 2.3. For file layouts, error codes and descriptions see the Client Information System (CIS) File Layout and Specifications Manual.

Step 4: Transmit File to AHCCCS

**Responsibility: ADHS ITS** 

ADHS ITS uploads the file to the AHCCCS FTP server each day at approximately 10:00 P.M., depending on volume.

Step 5: Process File Returned to the FTP Server by AHCCCS

Responsibility: ADHS ITS

After AHCCCS processes the enroll mods file, the AHCCCS response file is returned to the AHCCCS FTP server for ADHS/DBHS to download. ADHS ITS begins checking the FTP server at 12:00 A.M. and downloads it when available. Once downloaded, ADHS ITS processes the file to:



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Create the ADHS/DBHS AHCCCS eligibility file and the AHCCCS history file.

Generates both daily updates and the weekly full ADHS/DBHS Statewide Roster.

Step 6: Upload the Daily Updates and the Weekly Full Statewide Roster to the FTP Server

Responsibility: ADHS ITS

As a result of processing the AHCCCS response file, daily updates and the weekly full ADHS/DBHS client status file (not just individuals identified as behavioral health recipients with AHCCCS), are sent to the FTP common area server.

Step 7: Process Daily Updates and the Weekly Full Statewide Roster File Responsibility: T/RBHA

The T/RBHA is responsible for updating their internal files with the daily updates with, at a minimum, the client segment information and the T/RBHA enrollment information. The weekly full ADHS/DBHS Statewide Roster file should be used for reconciliation purposes and/or if errors occurred when processing the daily update file. If the T/RBHA successfully processes the daily update files, the full weekly file is not needed. The T/RBHA should use this roster when enrolling an individual to determine possible current enrollment with another T/RBHA.

Step 8: Distribute Hardcopy Reports

Responsibility: ADHS ITS

ADHS ITS sends a hardcopy of each report to the Office of Program Support. The reports generated as a result of processing the AHCCCS response file are as follows:

Report ID Report Name Purpose



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Report ID H74641.001

## Report Name

Input Eligibility
Roster Error Report

## <u>Purpose</u>

The purpose of this report is to identify segments that were returned by AHCCCS but did not post to the CIS system. These individuals have been identified at AHCCCS as behavioral health recipients but until ADHS/DBHS processes them correctly, they will not be tagged as AHCCCS behavioral health recipients in CIS, thus the individual's encounters will

not be sent to AHCCCS.

H74641.002 CIS Table Data Error Report

The purpose of this report is to identify segments where the action being requested by the AHCCCS segment is inconsistent with what currently resides in CIS. For example, the CIS table has multiple open intakes for an individual; therefore, the system can not determine which intake to post the AHCCCS segment to.

Processing details and file layout may be found in the Client Information System (CIS) File Layout and Specifications Manual.

Step 9: Research and Correct the Reports
Responsibility: Office of Program Support

The Office of Program Support is responsible for researching and correcting the records identified on each report. See Appendix A.1 and A.2 under the Daily Errors and Reports tab for corrective action steps and examples of these reports.



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## 2.5.3 AHCCCS Process

AHCCCS runs a daily process to determine which individuals submitted by ADHS/DBHS should be listed as behavioral health recipients.

Step 1: Download the File Sent by ADHS/DBHS

Responsibility: AHCCCS

AHCCCS downloads and processes the daily file sent by ADHS ITS.

Step 2: Check for Client Match Responsibility: AHCCCS

All records in the final enroll mods file that is transmitted from ADHS/DBHS are checked against the PMMIS database for a client match using specific criteria. Clients are marked as "no match, "match" or "partial match". Records that are a "no match" or "partial match" are not passed on to the next step.

Step 3: Check Eligibility for Behavioral Health Services Responsibility: AHCCS

All records that match in Step 2 are then checked to see if the individual is eligible to receive behavioral health services. If the individual is eligible, AHCCCS lists him/her as a behavioral health recipient.

Step 4: Return Files to the AHCCCS FTP Server

**Responsibility: AHCCCS** 

AHCCCS returns to the AHCCCS FTP server multiple files including a response file detailing the status on each client submitted by DBHS.

Step 5: Distribute Files to the T/RBHAs and the Office of Program Support Responsibility: ADHS ITS

For each file, ADHS ITS sorts and distributes a copy to the FTP T/RBHA-specific servers. The files generated as a result of the AHCCCS daily process are as follows:



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<u>File Name</u> <u>Purpose</u>

Response Identifies the status on each record

submitted by ADHS/DBHS and details whether the accepted

records are Title 19, Title 21, DD or

identified as AHCCCS behavioral

HIFA. Provides AHCCCS generated information on clients

health recipients.

Partial Match Identifies each record that was

considered a "partial match" and provides the reason the record was a "partial match." These individuals were not identified as behavioral health recipients by AHCCCS.

Discrepancy Identifies demographic

discrepancies on clients submitted by ADHS/DBHS as part of the daily

AHCCCS process.

LTC Identifies long term care clients

submitted by ADHS/DBHS as part of the daily AHCCCS process who aren't enrolled in a developmentally disabled (DD) health plan, thus not Title XIX/XXI behavioral health

eligible.

TPL Identifies and provides updates on

clients with Medicare A&B or third party insurance. For more detailed information on the TPL file see Section 2.8, Reference Files.



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File Name Purpose

Address Provides address changes on

clients identified in PMMIS as AHCCCS behavioral health

recipients.

Health Plan Provides health plan change

information on clients identified in PMMIS as AHCCCS behavioral

health recipients.

Step 6: Correct and Resubmit Responsibility: T/RBHA

The T/RBHAs are required to research, correct and resubmit if applicable, errors identified on the files. Corrected errors can be resubmitted through the intake change/corrected process discussed in Section 2.3. For file layouts see the Client Information System (CIS) File Layout and Specifications Manual.



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Chapter 2. Enrollment Procedures Section 2.6 Weekly Match Process

## 2.6.1 Introduction

As discussed in Sections 2.3 and 2.4, ADHS/DBHS processes the intakes, closures and demographic data submitted by the T/RBHAs as part of the automated nightly edit and update process. Once this is complete, all accepted records populate the various files maintained in CIS. These files are then used to run internal processes that create data files that are transferred to AHCCCS. In order for an individual to receive federal funding, he/she must be both Title XIX/XXI behavioral health eligible and listed at AHCCCS as a behavioral health recipient. The weekly match process is intended to identify T/RBHA enrolled individuals who have intake dates within the last six months that are not covered by an AHCCCS behavioral health recipient segment. All four entities, the T/RBHAs, ADHS/DBHS, ADHS ITS and AHCCCS have a responsibility in ensuring qualified individuals are successfully identified.

#### 2.6.2 ADHS/DBHS Process

ADHS ITS runs the weekly match process and adds the resulting data to the daily file that is transmitted to AHCCCS.

Step 1: Create File

Responsibility: ADHS ITS

The weekly match process identifies individuals who are not currently identified as AHCCCS behavioral health recipients or who have had a gap in services in the last six months. Records included in the file must meet the following criteria:

 No corresponding segment on the AHCCCS/behavioral health recipient file maintained by ADHS/DBHS.

Records meeting the above criteria are then processed through the following program:

## Program Name Purpose

Weekly Match

The purpose of the program is to identify individuals who are not identified as AHCCCS behavioral health recipients. This program creates the weekly match file that is added to the daily file and transmitted to AHCCCS.

See Section 2.5 for details on the daily AHCCCS process.



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Section 2.7 Monthly Reconciliation Process

#### 2.7.1 Introduction

As discussed in Sections 2.3 and 2.4, ADHS/DBHS processes the intakes, closures and demographic records submitted by the T/RBHAs as part of the automated nightly edit and update process. Once this is complete, all accepted records populate the various files maintained in CIS. These files are then used to run internal processes that create data files that are transferred to AHCCCS. While the weekly match process and daily AHCCCS process ensure individuals are correctly identified as Title XIX/XXI, the monthly reconciliation process identifies segment discrepancies with individuals currently listed as AHCCCS behavioral health recipients.

#### 2.7.2 AHCCCS Process

Step 1: Create Files for Transmission to ADHS/DBHS

**Responsibility: AHCCCS** 

AHCCCS runs their monthly process which creates a file of all ADHS/DBHS individuals who are both Title XIX/XXI behavioral health eligible and listed as AHCCCS behavioral health recipients at any time during the last six months.

Step 2: Transmit File to ADHS/DBHS

**Responsibility: AHCCCS** 

AHCCCS uploads the monthly reconciliation file and it is transmitted to the AHCCCS FTP server on the first of every month.

#### 2.7.3 ADHS/DBHS Process

The monthly reconciliation process is intended to reconcile the ADHS/DBHS data and the AHCCCS data.

Step 1: Process AHCCCS File Responsibility: ADHS ITS

ADHS ITS processes the monthly reconciliation file sent by AHCCCS.

Step 2: Distribute Hardcopy Report to the Office of Program Support Services Responsibility: ADHS ITS



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Section 2.7 Monthly Reconciliation Process

The following report is distributed monthly to the Office of Program Support Services:

# Report Name Monthly Client Reconciliation Report

## **Purpose**

The purpose of this report is to identify discrepancies between the AHCCCS and CIS system data for individuals listed as AHCCCS behavioral health recipients. The Office of Program Support should research and appropriately correct.

Step 3: Research and Correct Report

Responsibility: Office of Program Support

The Office of Program Support is responsible for the Monthly Client Reconciliation Report. The Office of Program Support must research and correct, if applicable, the records identified on this report. See Appendix B.1 under the Monthly Errors and Reports tab for corrective action steps and an example of this report.

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See the Client Information System (CIS) File Layout and Specifications Manual for a diagram of the ADHS/DBHS monthly reconciliation process.

Revision Date: July 1, 2004



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Section 2.8 Reference Files

#### 2.8.1 Introduction

This section contains information on the reference files that are provided by AHCCCS and ADHS/DBHS to assist the T/RBHAs in tracking individuals receiving services at both ADHS/DBHS and AHCCCS. The uses of these files will be discussed in the remainder of this section. The reference files can be categorized as:

Eligibility Information

- Other Insurance Information
- Capitation Information

The record layouts for each of these files can be found in the Client Information System (CIS) File Layout and Specifications Manual.

## 2.8.2 Eligibility Information - AHCCCS

AHCCCS sends ADHS/DBHS five files that provide information about Title XIX/XXI eligibility. The five files are the following:

- AHCCCS KidsCare
- □ Long Term Care ALTCS Extract
- Medicare HMO Matching Eligibility
- Address Change
- Health Plan Change

#### AHCCCS KidsCare File

Purpose: The purpose of this file is to provide information on all

KidsCare eligibles. This report began as an ad-hoc until the

KidsCare capitation was developed.

AHCCCS is responsible for uploading the file to the AHCCCS

Responsibility: FTP server.

ADHS ITS ADHS ITS begins checking the AHCCCS FTP server on the

Responsibility: 1<sup>st</sup> of every month and, once available, downloads the file. If

the file is not available on the AHCCCS FTP server by the 4<sup>th</sup> of the month, ITS contacts AHCCCS to find out the status of

the file.



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> Once downloaded, ITS creates a temporary table, sorts the data by T/RBHA ID and creates individual files for each T/RBHA. The individual files are then uploaded to the T/RBHA-specific FTP server.

Office of

**Program Support** Responsibility:

Monitor and provide technical assistance as needed to the

T/RBHAs.

T/RBHA Download Schedule: The T/RBHA is responsible for downloading the file from the ADHS/DBHS T/RBHA-specific FTP server between the 1<sup>st</sup> and 10<sup>th</sup> of the month (depending on when the file is available

for download from the AHCCCS FTP server).

T/RBHA

The T/RBHAs could use this file to identify individuals who

Responsibility:

are KidsCare eligible.

## Long Term Care ALTCS Extract File

Purpose: The purpose of this file is to identify non-DD individuals who

are long-term care eligible thus not eligible to receive

behavioral health services.

**AHCCCS** AHCCCS is responsible for uploading the daily file to the

AHCCCS FTP server. Responsibility:

ADHS ITS ADHS ITS downloads the file from the AHCCCS FTP server.

daily. ITS then uploads the file to the ADHS/DBHS FTP Responsibility:

server.

Office of

Program Support Responsibility:

Monitor and provide technical assistance as needed to the

T/RBHAs.

T/RBHA

The file is available for T/RBHA download from the FTP

Download

Schedule:

common area server daily.

T/RBHA

The T/RBHA is responsible for identifying individuals they are currently serving and who are on the LTC file. Thus, those Responsibility:

individuals are not eligible to receive services. The T/RBHAs

should appropriately refer these individuals.

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Section 2.8 Reference Files

## Medicare HMO Matching Eligibility (FYI) File

Purpose: This file identifies ADHS/DBHS individuals who are receiving

behavioral health services who are also being served by

Medicare HMO, CRS or Non-ALTCS DD.

AHCCCS is responsible for uploading the file to the AHCCCS

Responsibility: FTP server.

ADHS ITS ADHS ITS begins checking the AHCCCS FTP server on the Responsibility: 1st of every month and, once available, downloads the file. If

1<sup>st</sup> of every month and, once available, downloads the file. If the file is not available on the AHCCCS FTP server by the 4<sup>th</sup> of the month, ITS contacts AHCCCS to find out the status of

the file.

ITS then uploads the file to the ADHS/DBHS FTP server for

the T/RBHAs to download.

Office of Monitor and provide technical assistance as needed to the

Program Support T/RBHAs.

Responsibility:

T/RBHA The T/RBHA is responsible for downloading the file from the Download ADHS/DBHS FTP common area server between the 1<sup>st</sup> and Schedule: 10<sup>th</sup> of the month (depending on when the file is available for

download from the AHCCCS FTP server).

T/RBHA The T/RBHAs could use this file in coordination of care.

Responsibility:

#### 2.8.3 Eligibility Information – ADHS/DBHS

ADHS/DBHS sends the T/RBHA one file that provides information about Title XIX/XXI eligibility and ADHS/DBHS enrollment. The file is:

Statewide Roster



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## Statewide Roster File

Purpose: The purpose of this file is to identify individuals who are

receiving behavioral health services through ADHS/DBHS.

ADHS ITS ADHS ITS is responsible for uploading the file to the

Responsibility: ADHS/DBHS common area server.

Office of Monitor and provide technical assistance as needed to the

Program Support T/RBHAs.

Responsibility:

T/RBHA The T/RBHA is responsible for downloading the file from the

Download ADHS/DBHS common area server every Monday.

Schedule:

T/RBHA The T/RBHAs could use this file to verify at the time of intake

Responsibility: whether clients are currently or have been previously enrolled

in the CIS system.

#### 2.8.4 Other Insurance Information

AHCCCS provides a file containing information for individuals who have health insurance in addition to Medicaid. This information is transmitted in the Third Party Lead (TPL) file.

#### Third Party Lead (TPL) File

Purpose: The purpose of this file is to identify individuals who are

receiving behavioral health services through AHCCCS who may also have additional health insurance. The file contains Medicare Part A, Medicare Part B and other insurance types.

The Medicare Part A and B have been verified and the information is considered accurate; however, information for all other insurance is considered a "lead" and may not be

correct.

The file only contains additions or changes to existing records. A full file is provided once a year in November.

AHCCCS is responsible for uploading the file daily to the

Responsibility: AHCCCS FTP server.



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**ADHS ITS** ADHS ITS downloads the TPL file daily.

Responsibility:

Office of

Program Support Responsibility:

Monitor and provide technical assistance as needed to the

T/RBHAs.

T/RBHA Download Schedule: The T/RBHA is responsible for downloading the TPL file daily and, if applicable, ensuring the original record is replaced with the change record, thus avoiding multiple records. If the record is a "new" record, it simply needs to be added to the file. ADHS IT has provided a methodology to find the duplicate record and overlay the change record. This methodology is provided in the Client Information System

(CIS) File Layout and Specifications Manual.

T/RBHA Responsibility: The T/RBHA must use this file to verify individuals with Medicare Part A and Part B insurance. Additionally,

ADHS/DBHS recommends the T/RBHA use this file to verify the other health insurance information that is included in this

file.

## 2.8.5 Capitation Information

AHCCCS provides information on "at-risk" individuals currently receiving services through AHCCCS. This information is transmitted in the AHCCCS/BHS Monthly At Risk file.

## AHCCCS/BHS Monthly At Risk File

Purpose: The purpose of this file is to identify all individuals who are

Title XIX/XXI eligible and thus potentially eligible to receive

behavioral health services.

**AHCCCS** AHCCCS is responsible for uploading the file to the AHCCCS

FTP server. Responsibility:



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ADHS ITS Responsibility:

ADHS ITS begins checking the AHCCCS FTP server on the 1<sup>st</sup> of every month and, once available, downloads the file. If the file is not available on the AHCCCS FTP server by the 4<sup>th</sup> of the month, ITS contacts AHCCCS to find out the status of the file.

Once downloaded, ITS then uploads the file to the ADHS/DBHS FTP common area server. Additionally, a subset of the data is created for the Bureau of Quality Management and Evaluation and the Office of Program Support. Two files, containing the same data elements, are saved to the applicable LAN directories.

Office of Program Support Responsibility:

Monitor and provide technical assistance as needed to the T/RBHAs.

T/RBHA Download Schedule: The T/RBHA is responsible for downloading the file from the ADHS/DBHS FTP common area server between the 1<sup>st</sup> and 10<sup>th</sup> of the month (depending on when the file is available for download from the AHCCCS FTP server).

T/RBHA Responsibility: ADHS/DBHS recommends the T/RBHAs use this file to review penetration rates and identifying individuals who are

Title XIX/XXI eligible.



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Chapter 3. Provider Registration

#### 3.1 Introduction

This chapter of the *ADHS/DBHS Procedures Manual Volume I* is a reference guide for ADHS/DBHS, the T/RBHAs and their contractors that details the provider registration process for both Title XIX/XXI providers and non-Title XIX/XXI providers. Additional information on provider qualifications can be found in the ADHS/DBHS Covered Behavioral Services Guide. Specifically, the following topics are addressed in the following sections:

| Section    | Topic   |
|------------|---|
| 3.1        | Introduction                                    |
| 3.2        | Background                                      |
| 3.3        | Technical Assistance                            |
| 3.4        | Timeliness Requirements                         |
| 3.5        | Non-Title XIX Provider Registration/Information |
|            | Change Process                                  |
| 3.6        | ADHS/DBHS Notification                          |
| Appendix C | Provider Registration Material                  |

This manual is subject to change in response to new state or federal policies. The T/RBHAs and other manual holders will be informed of all changes as necessary.

## 3.2 Background

Any individual or agency may register as an ADHS/DBHS provider if the individual or agency is qualified to render services and meets the ADHS/DBHS requirements for provider participation. These requirements include:

- Obtaining any necessary license or certification
- Meeting provider standards for the service the individual or agency wishes to deliver
- Registering and obtaining an AHCCCS Title XIX/XXI provider ID or, for non-Title XIX/XXI providers, registering and obtaining an ADHS/DBHS provider ID
- Contracting with one or more of the T/RBHAs

#### Non-Title XIX Providers

ADHS/DBHS only issues provider IDs to non-Title XIX/XXI providers. Providers requesting an ADHS/DBHS provider ID must meet the requirements of one of the following ADHS/DBHS provider types:



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| Provider |   |
|----------|---|
| Type     | Provider Type Description               |
| S2       | Other                                   |
| S3       | Tribal Traditional Service Practitioner |

## Title XIX/XXI Providers

All other providers need to apply to the AHCCCS Provider Registration Unit for an AHCCCS provider ID meeting the requirements under one of the AHCCCS provider types:

| Provider |   |
|----------|---|
| Type     | Provider Type Description                                   |
| A2       | Level III Behavioral Health Residential (non-IMD)           |
| A3       | Community Service Agency                                    |
| A5       | Therapeutic Foster Care Home                                |
| A6       | Rural Substance Abuse Transitional Center                   |
| B1       | Level I Residential Treatment Center – Secure (IMD)         |
| B2       | Level I Residential Treatment Center – Non-Secure (non-IMD) |
| B3       | Level I Residential Treatment Center – Non-<br>Secure (IMD) |
| B5       | Level I Subacute Facility (non-IMD)                         |
| В6       | Level I Subacute Facility (IMD)                             |
| B7       | Level I Crisis Services                                     |
| 02       | Level I Hospital  |
| 03       | Pharmacy  |
| 04       | Laboratory  |
| 06       | Emergency Transportation                                    |
| 80       | Physician (Allopathic)                                      |
| 11       | Psychologist  |
| 18       | Physicians Assistant  |
| 19       | Nurse Practitioner  |
| 28       | Non-Emergency Transportation                                |
| 31       | Physician (Osteopathic)                                     |



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| Provider |  |
|----------|--|
| Type     | Provider Type Description                        |
| 39       | Habilitation Provider                            |
| 71       | Level I Psychiatric Hospital                     |
| 72       | T/RBHA   |
| 74       | Level II Behavioral Health Residential (non-IMD) |
| 77       | Outpatient Clinic                                |
| 78       | Level I Residential Treatment Center – Secure    |
|          | (non-IMD)  |
| 85       | Certified Independent Social Worker              |
| 86       | Certified Marriage/Family Therapist              |
| 87       | Certified Professional Counselor                 |

Providers who do not meet the requirements for either an AHCCCS provider ID or ADHS/DBHS provider ID are <u>not</u> eligible to provide services to ADHS/DBHS individuals.

Please keep in mind that a provider must register with either AHCCCS or ADHS/DBHS regardless of whether the service is provided to a Title XIX/XXI individual or a non-Title XIX/XXI individual.

## 3.3 Technical Assistance

Non-Title XIX providers should contact ADHS/DBHS Office of Program Support Monday through Friday at (602) 364-4704.

Title XIX/XXI providers should contact AHCCCS Provider Registration. Assistance can be obtained Monday through Friday at (602) 417-7670, option #5, or 1-800-794-6862 (in state) or 1-800-523-0231 (out-of-state).

## 3.4 Timeliness Requirements

The T/RBHA is required to submit the Non-Title XIX/XXI Provider Application form or Request for Provider Related Actions form upon receipt from the provider.

**Note:** Title XIX/XXI provider Registration and changes to existing to information must be submitted directly to AHCCCS.



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## 3.5 Non-Title XIX Provider Registration/Information Change Process

It is the T/RBHAs responsibility to submit non-Title XIX provider requests to ADHS/DBHS for processing. Regardless of the action, the provider should work directly with the T/RBHA when requesting a new provider ID or a change to an existing provider ID.

## Non-Title XIX Provider Registration

- Step 1: The Non-Title XIX/XXI provider should complete and submit the Provider Application form to the T/RBHA. See Appendix C.1 under the Provider Registration Process tab for a copy of the Provider Application form.
- Step 2: The T/RBHA completes the Request for Provider Related Actions form. See Appendix C.2 under the Provider Registration Process tab for a copy of the Request for Provider Related Actions form.
- Step 3: The T/RBHA submits the completed Request for Provider Related Actions form and the Provider Application form to the ADHS/DBHS Office of Program Support via mail or e-mail.
- Step 4: ADHS/DBHS will process the request within five days.

#### Change in Non-Title XIX Provider Information

- Step 1: The Non-Title XIX/XXI provider should contact the T/RBHA for the following information changes:
  - Extension of Covered Period
  - Closing of ADHS/DBHS Provider ID
  - Changes or Corrections
- Step 2: The T/RBHA should complete the Request for Provider Related Actions form. See Appendix C.2 under the Provider Registration Process tab for a copy of the Request for Provider Related Actions form.
- Step 3: The T/RBHA should submit the completed Request for Provider Related Actions form to the ADHS/DBHS Office of Program Support via mail or e-mail.
- Step 4: ADHS/DBHS will process the request within five days.



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## 3.6 ADHS/DBHS Notification

New Non-Title XIX ADHS/DBHS Provider ID

ADHS/DBHS notifies the provider of the approval or denial via mail and the T/RBHA via fax or e-mail. See Appendix C.3 under the Provider Registration Process tab for a copy of the transmittal letter for new ADHS/DBHS Provider IDs.

All Other Provider-Related Actions

ADHS/DBHS does not notify providers.